

RECEIVED
CENTRAL FAX CENTER

FEB 08 2006

→

PTC/SB/21 (08-00)

Approved for use through 10/31/2002, OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCETRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

9

Application Number	10/814,378
Filing Date	March 30, 2004
First Named Inventor	Douglas Phillips
Group Art Unit	3632
Examiner Name	Kimberly T. Wood

Attorney Docket Number

1192-012/ddh

ENCLOSURES (check all that apply)

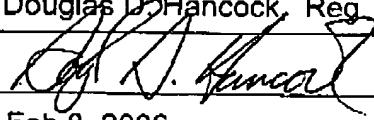
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Sheets	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Copy of PTOL-85B to Accompany Issue Fee
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Request for Patent Copies
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

Douglas D. Hancock, Reg. No. 35,889

Signature



Date

Feb 8, 2006

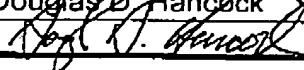
CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (703) 273-8300 on this date: Feb 8, 2006
571

Typed or printed name

Douglas D. Hancock

Signature



Date

Feb 8, 2006

Attorney's Reference Number: 1192-012/ddh

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/814,378

Applicant: Douglas Phillips

Filed: March 30, 2004

Examiner: Kimberly Wood

Art Unit: 3632

Confirmation No.: 5498

Commissioner for Patents
Alexandria, Virginia

Response

This responds to the Office action mailed December 16, 2005.

1. **Amendments to the Claims** begin on page 2 of this paper.
2. **Remarks** begin on page 5 of this paper.